TREAT & PROCESS

2012 equaling approximately 10,850 tons.

State of North Carolina

Department of Environment and Natural Resources Division of Waste Management

TREATMENT & PROCESSING FACILITY

For the period of July 1, 2011-June 30, 2012

According to (G.S. 130A-309.09D(b)) completed forms must be returned by August 1, 2012 and a copy of this report must be sent to the County Manager of each county from which waste was received. If you have questions or require assistance in completing this report, contact your Regional Environmental Senior Specialist.

Facility Name: OmniSource Southeast	Permit: 3420-INDUS-2005 ID: P1192							
Facility Website (URL):								
Physical Address	Mailing Address							
Street 1: 1426 West Mountain Street	Street 1: PO Box 608							
Street 2:	Street 2:							
City: Kernersville County: Forsyth	City: Kernersville							
State: North Carolina Zip: 27284	State: North Carolina Zip: 27285-0608							
Primary Facility Contact Person	Billing Contact Person							
Name: James Winegar	Name: James Winegar							
Phone: (919) 796-3023 Fax: (919) 989-3462	Phone: (919) 796-3023 Fax: (919) 989-3462							
Email: jwinegar@omnisourcese.com	Email: jwinegar@omnisourcese.com							
☐ Industrial Waste ☐ Yard Wa ☐ Construction and Demolition Waste ☐ Househo ☐ Other (describe) Minded material from closed ASR landfill 4. Indicate types of processes occurring at this facility. (Check all that ☐ Grinding, composting or mulching	aring and inert debris (LCID) aste old Hazardous Waste							
Cardboard tons PETE (#1) Plastic Wood tons HDPE (#2) Plastic	d; check all that apply and provide tonnages) tons							
5. Indicate the type and quantity of material from recycling or recovery operations.	tions stockpiled on-site as of June 30, 2012 (e.g. Wood-3 tons, Metal-5 tons,							

Approximately 130 tons of metal currently stockpiled from reclamation operations, with total material recovered from July 1, 2011 to June 30,

6. Total waste received at this facility <u>during the period of July 1, 2011 through June 30, 2012</u>. Indicate **tonnage** received by COUNTY of waste origin. If waste was received from a transfer station, treatment and processing, or mixed waste processing facility indicate the COUNTY LOCATION OF THE FACILITY. DO NOT include waste diverted for recycling, reuse, mulching, or composting. Please list ALL counties from which you received waste. Please indicate COUNTY and STATE, if received from another state.

eceived from	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	Total
	0	0	0	0	0	0	0	0	0	0	0	0	0

7. Indicate the facility(s) that received your facility's <u>non-recycled</u> waste material:

	Tons
Other	163,612
	163.612.00
	Other

REMINDER: According to (G.S. 130A-309.09D(b)), this report must be sent to the <u>Regional Environmental Senior Specialist</u> for your area and a copy of this report must be sent to the <u>County Manager of each county from which waste was received.</u>

Please return your completed report to:

C.T. Gerstell

610 East Center Avenue

waste was receiv	<u>y Manager of each cot</u> <u>ed</u> .	inty from whic		phone: 704.235.2144 email: Charles.Gerstell@ncdenr.gov				
CERTIFICATION:	I certify that the infor	mation provid	ed is an accurate representation of the a	activity at th	nis facility.			
Signature: James Winegar DN: cn=James V			ly signed by James Winegar =James Winegar, o=OSE, ou, email=jwinegar@omnisourcese.com, c=US 012.07.16 14:56:48 -04'00'	Date:	Jul 16, 2012			
Name: James Wine	egar		Title: Environmental	l Manager				
Phone Number:	(919) 796-3023	Email: j	winegar@omnisourcese.com					
T&P 2012			3420-INDUS-2005			Page		